

Form CPF 18A: Report of Independent Expenditure Promoting Election or Defeat of Candidate(s)

Office of Campaign and Political Finance

Date of Report: Date of Report: Date	
Ashbutton Place (Must be filed within 7 business days of expenditure(s) in excess of \$100.00 in aggregate) Expenditure(s) Made By: Massachusetts Nurses Association (Name of individual or group making expenditure) 340 Turnpike St. Canton 0.202 Street Address City/Town Zip	H
Date of Report: (Must be filed within 7 business days of expenditure(s) in excess of \$100.00 in aggregate) (Must be filed within 7 business days of expenditure(s) in excess of \$100.00 in aggregate) Expenditure(s) Made By: Massachusetts Nurses Association (Name of individual or group making expenditure) 340 Turnpike St. Canton 0202 Street Address City/Town Zip Name of Candidate(s) For Whom the Above Expenditure(s) Election or Defeat Promoted: ANN GOOM State Performance Expenditure(s): Date Paid To Whom Paid Address Purpose	
Date of Report: (Must be filed within 7 business days of expenditure(s) in excess of \$100.00 in aggregate) Expenditure(s) Made By: Massachusetts Nurses Association (Name of individual or group making expenditure) 340 Turnpike St. Canton 0202 Street Address City/Town Zip Name of Candidate(s) For Whom the Above Expenditure(s) Election or Defeat Promoted: Ann Golm , State Reported: Expenditure(s): Date Paid To Whom Paid Address Purpose	
Expenditure(s) Made By: Massachusetts Nurses Association (Name of individual or group making expenditure) 340 Turnpike St Canton 0202 Street Address City/Town Zip	
(Name of individual or group making expenditure) 340 Turnpike St. Canton 0202 Street Address City/Town Zip Name of Candidate(s) For Whom the Above Expenditure(s) Election or Defeat Promoted: Ann Golon , State Per Ceres Company	25 E
Name of Candidate(s) For Whom the Above Expenditure(s) Election or Defeat Promoted: Ann Golon, State: Rependiture(s): Date Paid To Whom Paid Address Purpose	¥ 0
1. Expenditure(s): Date Paid To Whom Paid Address Purpose Of Labor Paid Mailing	21
Ann Golon, State Ref. Expenditure(s): Date Paid To Whom Paid Address Purpose Of Labor Paid Mailing	
Date Paid To Whom Paid Address Purpose	
Date Paid To Whom Paid Address Purpose	*
Date Paid To Whom Paid Address Purpose	
Date Paid To Whom Paid Address Mailing	
Date Paid To Whom Paid Address Mailing	Amount
(118,11
D/27/00 Saltus Press 24 Jolma Rd. Mailing	(1011)
Worcester, 01604	
	-
194.	
I hereby certify the expenditures noted are independent expenditures, as defined by M.G.L. c.55, section 18A:	
Thereby contributed herein did not solicit or receive any cont	tributions in
(1) the individual(s) or group who made the expenditure(s) described herein did not solicit or receive any cont	. '
contemplation of silch experiments, and	I III CONCERT W
(2) the individual(s) or group who made the expenditure(s) described herein did not cooperate, constant of the individual(s) or group who made the expenditure(s) described herein did not cooperate, constant of the individual(s) or group who made the expenditure(s) described herein did not cooperate, constant of the individual(s) or group who made the expenditure(s) described herein did not cooperate, constant of the individual(s) or group who made the expenditure(s) described herein did not cooperate, constant of the individual(s) or group who made the expenditure(s) described herein did not cooperate, constant of the individual(s) or group who made the expenditure(s) described herein did not cooperate, constant of the individual(s) or group who made the expenditure(s) described herein did not cooperate, constant of the individual(s) or group who made the expenditure(s) described herein did not cooperate, constant of the individual(s) or group who made the expenditure(s) described herein did not cooperate, constant of the individual solution of the individua	late, or any
or at the request or suggestion of any candidate, of pointed committee in making such expenditure(s).	
I further certify that all statements made herein are true and accurate.	20 200 9
Signed under the penalties of perjury:	
Katrina Anderson Director, Legislation and C	Governmen
Vehala Andream 10/30/06 Director, Legislation and	e (if signing o
Date Print Name of Individual Signer and Title	Cir signing
Signature Egyl behalf of a group)	
TAGETTER & YOUANA DO T	